

# ABBOTT RUBBER COMPANY, INC.

## New Account Application

1700 Nicholas Blvd. Elk Grove Village, IL 60007 (847) 952-1800 (800) 852-1855 FAX (847) 952-0156

PLEASE FILL OUT COMPLETELY

BILLING INFO	SHIPPING ADDRESS <small>Same as Billing Address <input type="checkbox"/></small>
<p>Company Name _____</p> <p>Address 1 _____</p> <p>Address 2 _____</p> <p>City _____ State _____ Zip _____ Country _____</p> <p>Accounts Payable Contact: _____</p> <p><input type="checkbox"/> Phone _____ <input type="checkbox"/> Fax _____</p> <p><input type="checkbox"/> Email _____</p> <p>↑ Please Check Contact Method Above ↑</p> <p>Invoice Method: _____</p> <p>Tax Exempt/Resale No.: _____</p> <p>Illinois Customers: Please Provide CRT-61 Certificate if for Resale</p> <p>Type of Business: _____</p> <p>Date Established: _____</p>	<p>Company Name _____</p> <p>Address 1 _____</p> <p>Address 2 _____</p> <p>City _____ State _____ Zip _____ Country _____</p> <p>Purchasing Contact: _____</p> <p><input type="checkbox"/> Phone _____ <input type="checkbox"/> Fax _____</p> <p><input type="checkbox"/> Email _____</p> <p>↑ Please Check Contact Method Above ↑</p> <p>Acknowledge Orders Via: _____</p> <p>Types of Products: _____</p> <p>Add to Mailing List: Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>How Did You Hear About Us? _____</p>

**\*\* PLEASE NOTE: ALL INVOICES WILL BE EMAILED OR FAXED \*\***

BUSINESS REFERENCES	
<p>1</p> <p>Business Name _____</p> <p>Address 1 _____</p> <p>City _____ State _____ Zip _____ Country _____</p> <p>Contact Name: _____</p> <p>Phone _____ Fax _____ Email _____</p>	<p>2</p> <p>Business Name _____</p> <p>Address 1 _____</p> <p>City _____ State _____ Zip _____ Country _____</p> <p>Contact Name: _____</p> <p>Phone _____ Fax _____ Email _____</p>
<p>3</p> <p>Business Name _____</p> <p>Address 1 _____</p> <p>City _____ State _____ Zip _____ Country _____</p> <p>Contact Name: _____</p> <p>Phone _____ Fax _____ Email _____</p>	<p>4</p> <p>Business Name _____</p> <p>Address 1 _____</p> <p>City _____ State _____ Zip _____ Country _____</p> <p>Contact Name: _____</p> <p>Phone _____ Fax _____ Email _____</p>

BANK REFERENCE
<p>Business Name _____</p> <p>Address 1 _____</p> <p>City _____ State _____ Zip _____ Account No. _____</p> <p>Contact Name: _____</p> <p>Phone _____ Fax _____ Email _____</p>

We hereby grant authorization to the bank and trade companies for release of any information to **Abbott Rubber Company Inc.** for the purpose of establishing an open account.

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Please Print: \_\_\_\_\_